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PTO/SB/01 (10-00)
Approved for use through 10/31/2002 OMB 0651-0032

Patent and Trademark Office, U. S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	HON 1448-020
	First Named Inventor	Nelson
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	August 16, 2001
	Group Art Unit	
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

SYSTEM AND METHOD FOR DETECTING SUPPLIER INSTABILITY

(Title of the Invention)

the specification of which

☒ is attached hereto
OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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or Bar Code LabelOR ☐ Correspondence address below

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Name

PATENT TRADEMARK OFFICE

Address

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1 001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Robert D.

Family Name

or Surname Nelson

Inventor's

Signature

Robert D. Nelson

Date

8/9/01

Residence: City Dublin

state Ohio

Country USA

Citizenship USA

Mailing Address 7080 Wendy Trail Lane

Mailing Address

City Dublin

State Ohio

ZIP 43017

Country USA

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Bradley K.

Family Name

or Surname Rachel

Inventor's

Signature

Bradley K. Rachel

Date

8/9/01

Residence: City Dublin

State Ohio

Country USA

Citizenship USA

Mailing Address 5195 Darry Lane

Mailing Address

City Dublin

State Ohio

ZIP 43016

Country USA

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Bryan K.

Clay

Inventor's
Signature

Bryank. Clay

Date 8-9-01

Residence: City Gahanna

State Ohio

Country USA

Citizenship USA

Mailing Address 161 Scottsbury Ct.

Mailing Address

City Gahanna

State Ohio

ZIP 43230

Country USA

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

Mailing Address

City

State

ZIP

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Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

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PTO/SB/81 (10-00)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	August 16, 2001
First Named Inventor	Nelson
Group Art Unit	
Examiner Name	
Attorney Docket Number	HON 1448-020

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

Place Customer
Number Bar Code
Label here

Name	Registration Number
Jeffrey S. Standley	34,021
Carol G. Stovsky	42,171
Alan T. McDonald	28,099
Vince Ciamacco	46,626

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Standley & Gilcrest LLP				
Address	495 Metro Place South, Suite 210				
Address					
City	Dublin	State	Ohio	ZIP	43017-5319
Country	USA				
Telephone	(614) 792-5555	Fax	(614) 792-5536		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Robert D. Nelson
Signature	<i>Robert D. Nelson</i>
Date	8/9/01

Note. Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*

☒ *Total of 3 forms are submitted.

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Attorney Docket Number	HON 1448-020

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SIGNATURE of Applicant or Assignee of Record

Name	Bradley K. Rechel
Signature	<i>Bradley K. Rechel</i>
Date	8/9/01

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Bryan K. Clay
Signature	<i>Bryan K. Clay</i>
Date	8-9-01

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